

Scientific Coordination, Inc.

Helping Technology Transfer
4629 Cherry Valley Drive
Rockville, MD 20853
16 August 2004

Document Processing Desk (APPL)
Office of Pesticide Programs (7505C)
U.S. Environmental Protection Agency
1801 South Bell Street
Arlington, VA 22202-4501
ATTN: Mr. Richard Gebken, PM 10

Subject: Insect Guard "25-S" Aerosol, EPA Reg. No. 54287-
"Initial Registration Submission"
Fee For Service Category XXXX: Not required; Waiver Applied For/Granted

Dear Mr. Gebken:

Enclosed, please find our Client, Associated Registration, Inc.'s, Application for Pesticide Registration for the subject product under the Selective method of support (cite-all option under the selective method).

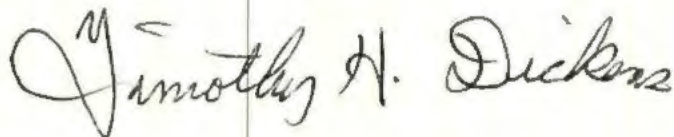
Included are the following:

1. Application For Pesticide Registration, EPA Form 8570-1
2. Confidential Statement of Formula, 8570-4
3. Formulator's Exemption Statement, 8570-27
4. Certification with Respect to Citation of Data, 8570-34
5. Data Matrix (3 pages), 8570-35
6. Proposed Product Labeling (5 copies)
7. Series 830 - Product Chemistry Data (3 copies) [MRID # Assigned: _____]
8. MGK Letter of Authorization

We certify that the one-year storage stability testing results will be submitted upon completion.

As you have questions or comments regarding this submission please do not hesitate to contact me at (301) 570-4390.

Sincerely yours,



Timothy H. Dickens, Ph.D.
Registered Agent
encl./as listed

843
40.17.00



McLAUGHLIN GORMLEY KING COMPANY

8810 Tenth Avenue North • Minneapolis, MN 55427-4319 U.S.A.
763-544-0341 • 800-645-6466 • Fax 763-544-6437 • www.mgk.com

August 13, 2004

Mr. Richard Gebken, PM 10
Office of Pesticide Programs (H7505C)
U.S. Environmental Protection Agency
Ariel Rios Building
1200 Pennsylvania Avenue, N.W.
Washington, D.C. 20460-0001

Subject: Associated Registrations

Dear Mr. Gebken:

This letter serves as authorization, in accordance with our agreement with the registrant, to refer to the following data submitted by McLaughlin Gormley King Company to EPA for the subject company's registration.

Toxicology: 81-1 MRID #448997-01 - submitted 8/13/99 to EPA Reg. No. 1021-891
81-2 MRID #448997-02 - submitted 8/13/99 to EPA Reg. No. 1021-891
81-3 MRID #448997-03 - submitted 8/13/99 to EPA Reg. No. 1021-891
81-4 MRID #448997-04 - submitted 8/13/99 to EPA Reg. No. 1021-891
81-5 MRID #448997-05 - submitted 8/13/99 to EPA Reg. No. 1021-891
81-6 MRID #448997-06 - submitted 8/13/99 to EPA Reg. No. 1021-891

Product Chemistry: MRID #443131-03 - submitted to EPA Reg. No. 1021-1706

Storage Stability: MRID #448990-01 - submitted to EPA Reg. No. 1021-1706

Efficacy: MRID #458514-01 - submitted to EPA Reg. No. 1021-1600
MRID #459016-01 - submitted to EPA Reg. No. 1021-891
MRID #226378 - submitted to EPA Reg. No. 1021-891
MRID #437200-01 - submitted to EPA Reg. No. 1021-891

Registrant's Product: Insect Guard "25-S" Aerosol
EPA Reg. No.: 54287-

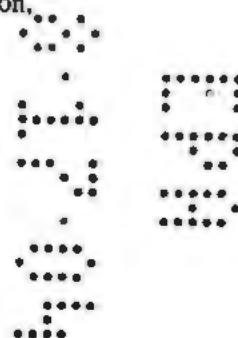
Although this is authorization to rely on MGK data for the subject company's subject registration, absolutely no data of a confidential nature is to be disclosed to them.

Sincerely,

McLAUGHLIN GORMLEY KING COMPANY

Julie B. Schlekau
Registration Specialist

Quality Products Since 1902





United States
Environmental Protection Agency
Washington, DC 20460

☒ Registration
☐ Amendment
☐ Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 54287- <i>PO</i>	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) INSECT GUARD "25-S" AEROSOL	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Associated Registrations c/o Scientific Coordination, Inc. 4629 Cherry Valley Drive Rockville, MD 20853 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. <u>4822-167</u> Product Name <u>OFF! Insect Repellent Spray V</u>	

Section - II

<input checked="" type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input checked="" type="checkbox"/> "Me Too" Application.
<input type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Application For Registration: Selective method of support (cite-all option under the selective method).

Section - III

1. Material This Product Will Be Packaged In:				2. Type of Container	
Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
* Certification must be submitted				<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
	If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt. No. per container		<input type="checkbox"/> Other (Specify) _____	
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container 2 thru 32 oz.	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input checked="" type="checkbox"/> On Labeling accompanying product		
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input checked="" type="checkbox"/> Stenciled			<input type="checkbox"/> Other _____		

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Timothy H. Dickens, Ph.D.	Title Registered Agent	Telephone No. (Include Area Code) 301-570-4390	
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received (Stamped)
2. Signature <i>Timothy H. Dickens</i>	3. Title Registered Agent		
4. Typed Name Timothy H. Dickens, Ph.D.	5. Date <i>16 August 2004</i>		



United States
Environmental Protection Agency
Washington, DC 20460
Formulator's Exemption Statement
(40 CFR 152.85)

Applicant's Name and Address

Associated Registrations c/o Scientific Coordination, Inc.
4629 Cherry Valley Drive
Rockville, MD 20853

EPA File Symbol/Registration Number

54287-

Product Name

INSECT GUARD "25-S" AEROSOL

Date of Confidential Statement of Formula (EPA Form 8570-4)

08/16/2004

As an authorized representative of the applicant for registration of the product identified above, I certify that:

(1) This product contains the following active ingredient(s):

Deet Insect Repellent 99.11%

- (2) Of these, each active ingredient listed in paragraph (4) is present solely as the result of the use of that active ingredient in the manufacturing, formulation or repackaging another product which contains that active ingredient which is registered under FIFRA Section 3, is purchased by us from another producer, and is labeled for at least each use for which my product is proposed to be labeled.

(3) Indicate by checking (A) or (B) below which paragraph applies:

☒ (A) An accurate Confidential Statement of Formula (EPA FORM 8570-4) for the above identified product is attached to this statement. That formula statement indicates, by company name, registration number, and product name, the source of the active ingredient(s) listed in paragraph (1).

OR

☐ (B) The Confidential Statement of Formula (CSF) (EPA Form 8570-4) referenced above and on file with the EPA is complete, current, and accurate and contains the information required on the current CSF.

(4) The following active ingredients in this product qualify for the formulator's exemption.

Source

Active Ingredient	Product Name	Registration Number
Deet [REDACTED]	[REDACTED]	[REDACTED]
Product ingredient source information may be entitled to confidential treatment		
Signature <i>Timothy H. Dickens</i>	Name and Title Timothy H. Dickens, Ph.D., Registered Agent	Date 8 August 2004



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
401 M Street, S.W.
WASHINGTON, D.C. 20460

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Certification with Respect to Citation of Data

Applicant's/Registrant's Name, Address, and Telephone Number Associated Registrations Inc. Scientific Coordination, Inc., 4629 Cherry Valley Dr., Rockville, MD 20853 301-570-4390	EPA Registration Number/File Symbol 54287-
Active Ingredient(s) and/or representative test compound(s) Deet Insect Repellent 98.11%	Date 16 August 2004
General Use Pattern(s) (list all those claimed for this product using 40 CFR Part 158) Personal Insect Repellent	Product Name INSECT GUARD "S-S" AEROSOL

NOTE: If your product is a 100% repackaging of another purchased EPA-registered product labeled for all the same uses on your label, you do not need to submit this form. You must submit the Formulator's Exemption Statement (EPA Form 8570-27).

☐ I am responding to a Data-Call-In Notice, and have included with this form a list of companies sent offers of compensation (the Data Matrix form should be used for this purpose).

SECTION I: METHOD OF DATA SUPPORT (Check one method only)

☐ I am using the cite-all method of support, and have included with this form a list of companies sent offers of compensation (the Data Matrix form should be used for this purpose).

☒ I am using the selective method of support (or cite-all option under the selective method), and have included with this form a completed list of data requirements (the Data Matrix form must be used).

SECTION II: GENERAL OFFER TO PAY

[Required if using the cite-all method or when using the cite-all option under the selective method to satisfy one or more data requirements]

☒ I hereby offer and agree to pay compensation, to other persons, with regard to the approval of this application, to the extent required by FIFRA.

SECTION III: CERTIFICATION

I certify that this application for registration, this form for reregistration, or this Data-Call-In response is supported by all data submitted or cited in the application for registration, the form for reregistration, or the Data-Call-In response. In addition, if the cite-all option or cite-all option under the selective method is indicated in Section I, this application is supported by all data in the Agency's files that (1) concern the properties or effects of this product or an identical or substantially similar product, or one or more of the ingredients in this product; and (2) is a type of data that would be required to be submitted under the data requirements in effect on the date of approval of this application if the application sought the initial registration of a product of identical or similar composition and uses.

I certify that for each exclusive use study cited in support of this registration or reregistration, that I am the original data submitter or that I have obtained the written permission of the original data submitter to cite that study.

I certify that for each study cited in support of this registration or reregistration that is not an exclusive use study, either: (a) I am the original data submitter; (b) I have obtained the permission of the original data submitter to use the study in support of this application; (c) all periods of eligibility for compensation have expired for the study; (d) the study is in the public literature; or (e) I have notified in writing the company that submitted the study and have offered (i) to pay compensation to the extent required by sections 3(c)(1)(F) and/or 3(c)(2)(B) of FIFRA; and (ii) to commence negotiations to determine the amount and terms of compensation, if any, to be paid for the use of the study.

I certify that in all instances where an offer of compensation is required, copies of all offers to pay compensation and evidence of their delivery in accordance with sections 3(c)(1)(F) and/or 3(c)(2)(B) of FIFRA are available and will be submitted to the Agency upon request. Should I fail to produce such evidence to the Agency upon request, I understand that the Agency may initiate action to deny, cancel or suspend the registration of my product in conformity with FIFRA.

I certify that the statements I have made on this form and all attachments to it are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature <i>Timothy H. Dickens</i>	Date 08/16/2004	Typed or Printed Name and Title Timothy H. Dickens, Ph.D., Registered Agent
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401 M Street, S.W.
WASHINGTON, D.C. 20460

Form Approved OMB No. 2070-0060

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DATA MATRIX

Date			EPA Reg No./File Symbol 54287-		Page 1 of 3
Applicant's/Registrant's Name & Address Associated Registrations c/o Scientific Coordination, Inc., 4629 Cherry Valley Dr., Rockville, MD 20853			Product INSECT GUARD "25-S" AEROSOL		
Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
Product Chemistry 830.1550	Chemical Identity	See CSF	Associated Registrations	OWN	
830.1650	Beginning Materials & Manufacturing Process		Associated Registrations	OWN	
830.1670	Discussion of Formation of Impurities		Associated Registrations	OWN	
830.1700	Preliminary Analysis	NA	NA	FOR	
830.1750	Certification of Ingredient Limits	See CSF	Associated Registrations	OWN	
830.1800	Analytical Method to Verify Certified Limits	443131-03	MGK	PER	
830.6302	Color		Associated Registrations	OWN	
830.6303	Physical State		Associated Registrations	OWN	
830.6304	Odor		Associated Registrations	OWN	
830.7200	Melting Point	NA	NA	FOR	
830.7220	Boiling Point	NA	NA	FOR	
830.7300	Density, Bulk Density or Specific Gravity		Associated Registrations	OWN	
830.7860	Solubility	NA	NA	FOR	
830.7950	Vapor Pressure	NA	NA	FOR	
830.7370	Dissociation Constant	NA	NA	FOR	
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date <i>08/16/2004</i>



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Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
830.7550	Octanol/Water Partition Coefficient	NA	NA	NA	
830.7000	pH		Associated Registrations	OWN	
830.6313	Stability	NA	NA	NA	
830.6314	Oxidizing/Reducing Action		Associated Registrations	OWN	
830.6315	Flammability		Associated Registrations	OWN	
830.6316	Explosibility	NA	NA	----	1
830.6317	Storage Stability		Associated Registrations	OWN	2
830.7100	Viscosity		Associated Registrations	OWN	
830.6319	Miscibility		Associated Registrations	OWN	
830.6320	Corrosion Characteristics		Associated Registrations	OWN	2
830.6321	Dielectric Breakdown Voltage	NA	NA	----	3
Toxicology	870.1100	Acute Oral LD50 - Rat	448997-01	MGK/CITE-ALL	PER
	870.1200	Acute Dermal LD50 - Rat/Rabbit	448997-02	MGK/CITE-ALL	PER
	870.1300	Acute Inhalation LC50 - Rat	448997-03	MGK/CITE-ALL	PER
	870.2400	Primary Eye Irritation - Rabbit	448997-04	MGK/CITE-ALL	PER
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date 08/16/2004



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Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
870.2500	Primary Dermal Irritation	448997-05	MGK/CITE-ALL	PER	
870.2600	Dermal Sensitization	448997-06	MGK/CITE-ALL	PER	
FOOTNOTES:					
	1 - Will Not Explode				
	2 - We certify this data will be submitted upon completion.				
	3 - Not For Use Around electrical Equipment				
Efficacy 810.3400	Efficacy	458514-01	MGK	PER	
	Efficacy	459016-01	MGK	PER	
	Efficacy	226378	MGK	PER	
	Efficacy	437200-01	MGK	PER	
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date 08/16/2004



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Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			NA	FOR	
			Associated Registrations	OWN	
			MGK	PER	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			NA	FOR	
			NA	FOR	
			Associated Registrations	OWN	
			NA	FOR	
			NA	FOR	
			NA	FOR	
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date 08/16/2004



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Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
			NA	NA	
			Associated Registrations	OWN	
			NA	NA	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			NA	----	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			Associated Registrations	OWN	
			NA	----	
			MGK/CITE-ALL	PER	
			MGK/CITE-ALL	PER	
			MGK/CITE-ALL	PER	
			MGK/CITE-ALL	PER	
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date <i>05/16/2004</i>



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Ingredient DEET					
Guideline Reference Number	Guideline Study Name	MRID Number	Submitter	Status	Note
			MGK/CITE-ALL	PER	
			MGK/CITE-ALL	PER	
			MGK	PER	
			MGK	PER	
			MGK	PER	
			MGK	PER	
Signature <i>Timothy H. Dickens</i>			Name and Title Timothy H. Dickens, Ph.D., Registered Agent		Date 08/16/2004